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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/599,716			ing Date 06/2006	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)								SMALL	ENTITY 🗌	OR		HER THAN ALL ENTITY	
FOR			NUMBER FILED		NUMBER EXTRA			RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
BASIC FEE (37 CFR 1.16(a), (b), or (c))			N/A		N/A			N/A			N/A		
SEARCH FEE (37 CFR 1.16(k), (i), or (m))			N/A		N/A			N/A			N/A		
EXAMINATION FEE (37 CFR 1.16(o), (p), or (q))			N/A		N/A			N/A			N/A		
TOTAL CLAIMS (37 CFR 1.16(i))			mir	us 20 = *	*			X \$ =		OR	X \$ =		
INDEPENDENT CLAIMS (37 CFR 1.16(h))			m	nus 3 = *	*			X \$ =			X \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	sh is ad	neets of pape \$250 (\$125 dditional 50 s	er, the appli for small er sheets or fra	d drawings exceed 100 pplication size fee due II entity) for each r fraction thereof. See and 37 CFR 1.16(s).								
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))													
* If t	the difference in col	r "0" in colum		TOTAL			TOTAL						
APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								OTHER THAN SMALL ENTITY OR SMALL ENTITY					
AMENDMENT	02/23/2011	CLAIMS REMAINING AFTER AMENDMEI		HIGHEST NUMBER PREVIOUS PAID FOR		PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	* 10	Minus	** 20		= 0		X \$ =		OR	X \$52=	0	
	Independent (37 CFR 1.16(h))	* 3	Minus	***3		= 0		X \$ =		OR	X \$220=	0	
	Application Size Fee (37 CFR 1.16(s))												
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
		(Column 1)	(Column		(Column 3)				_	,		
1ENDMENT		CLAIMS REMAININ AFTER AMENDMEI		HIGHES NUMBE PREVIOUS PAID FO	R SLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	*	Minus	**		=		X \$ =		OR	X \$ =		
	Independent (37 CFR 1.16(h))	*	Minus	***		=		X \$ =		OR	X \$ =		
	Application Size Fee (37 CFR 1.16(s))												
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
** If *** I	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

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